

POSITION	INITIALS	IC NO.	DATE
FEE DETERMINATION	S.Z		04-30-01
O.I.P.E. CLASSIFIER		69	5/21/01
FORMALITY REVIEW	TH	953	06-20-01
RESPONSE FORMALITY REVIEW	SB	1091	9-25-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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2/21/01

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